Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		Vo.	Bhandari 1-14-3				
First Inventor Bha		Bha	ndari	-			
Title	METHOD, APPARATUS AND SYSTEM FOR GUARANTEED PACKET DELIVERY TIMES IN ASYNCHRONOUS NETWORKS						

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Title	METHOD, APPARATUS AND SYSTEM FOR GUARANTEED PACKET DELIVERY TIMES IN ASYNCHRONOUS NETWORKS							
Expres	ss Mail Label No.	EV367980988US						

<u> </u>					'							
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450							
1. X F	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)					Alexandria, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
2. 🗌 🛚 🗗	Applicant claims		Nucleotide and/or Amino Acid Sequence Submission									
See 37 CFR 1.27. Specification/Cover [Total Pages 25] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table,					 (if applicable, all necessary) a. ☐ Computer Readable Form (CRF) b. Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper c. ☐ Statements verifying identity of above copies 							
	or a computer pro Background of the		enaix		ACCOMPANYING APPLICATIONS PARTS							
	Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s)				9. 🔲 10. 🔲	Assignments 37 C.F.R.§						
•	Abstract of the Di	sclosure			11. 🗌	11. English Translation Document (if applicable)						
	nal Drawing(s) (-	7]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations							
5. Oath or Declaration [Total Pages]					13. 🔲							
_	 a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)) 					14. Return Receipt Postcard (MPEP 503)						
						(Should be specifically itemized) 15. Certified Copy of Priority Document(s)						
i. 🗀	DELETION			•	(if foreign priority is claimed)							
	named in the pr	nt attached dele ior application, s			16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35							
е 🗀 🕶	1.63(d)(2) and 1	• •	OED 4.76		or its equivalent.							
o. L. App	6. Application Data Sheet. See 37 CFR 1.76					17. Other: Permit to File Abroad						
18. If a CON	TINUING APPLIC	CATION, check	appropriate bo	ox, and supply	the requisi	te informatio	n below and in a	preliminary amendment,				
	olication Data Sh				•							
☐ Conti	☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No:/											
	Prior application information: Examiner Group / Art Unit:											
under Box 5	For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.											
				ORRESPON				Paris Paris				
				2629	91							
☐ Customer Number or Bar Code Label (Insert Customer No. or Att			or Correspondence address below ach bar code label here)									
Name	Moser, Patte	rson & Sherida	an, LLP									
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City	Shrewsbury			State	NJ		Zip Code	07702				
Country	USA	USA Telephone			(732) 530	9404	Fax	.(732) 530-9808				
Name (Pr	Name (Print/Type) Eamor				Registratio	n No. (Attori	ney/Agent)	39,414				
Signature		EIN		Date 3/10/04								

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon on the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-03)
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FEE TRANSMITTAL	Complete if Known							
FEE IRANSIVIII IAL	Application Number N			Not Y	ot Yet Assigned			
for FY 2004	Filing Date			Here	Herewith			
Effective 01/01/2003. Patent fees are subject to annual revision.	First Named Inventor			Bhan	Bhandari			
Applicant Claims small entity status. See 37 CFR 1.27	Examir	Examiner Name N			ot Yet Assigned			
	Group / Art Unit N			Not Y	ot Yet Assigned			
TOTAL AMOUNT OF PAYMENT (\$) 0	Attorney Docket No. BI			Bhan	nandari 1-14-3			
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
Check Credit Card Money Other None	3. ADD	TIONAL	FEES					
Order Deposit Account	Large Entity Small Entity						Ess	
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee C	Description	Fee Paid	
Account 20-0782 Number	1051 1052	130	2051	65	_	filing fee or oath		
Deposit	1052	50	2052	25	or cover sheet.	provisional filing t	ree	
Account Moser, Patterson & Shendan, LLP Name	1053	130	1053	130	Non-English spe			
The Director is authorized to: (Check all that apply)	1812 1804	2,520 920*	1812 1804	2,520 920*		est for reexaminat ication of SIR price		
Charge fee(s) indicated below Credit any overpayments	1	323	,,,,,,	020	Examiner action			
Charge any additional fee(s) during pendency of this application	1805	1,840*	1805	1,840*	Requesting public Examiner action	ication of SIR afte	er	
Charge fee(s) indicated below, except for the filing fee	1251	110	2251	55		ply within first mor	nth	
to the above-identified deposit account	1252	420	2252	210		ply within second		
The filing fee will be paid at the time of completion of the application.	1253	950	2253	475	month Extension for re	ply within third mo	onth	
FEE CALCULATION	1254	1,480	2254	740	Extension for re		····	
1. BASIC FILING FEE	1255	2,010	2255	1,005	month	nhu within 68h mar		
Large Entity Small Entity	1401	330	2401	165	Notice of Appea	ply within fifth mor I	""	
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	1402	330	2402	165		support of an appe	eal	
1001 770 2001 385 Utility filing fee 770	1403	290	2403	145	Request for oral	-		
1002 340 2002 170 Design filing fee	1451	1,510	2451	1,510	Petition to institu proceeding	ite a public use		
1003 530 2003 265 Plant filing fee 1004 770 2004 385 Reissue filing fee	1452	110	2452	55	Petition to revive	e – unavoidable		
1004 770 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filling fee	1453	1,330	2453	665	Petition to revive			
	1501 1502	1,330 480	2501 2502	665 240	Utility issue fee (or reissue) Design issue fee			
SUBTOTAL (1) (\$) 770	1503	640	2503	320	Plant issue fee			
2. EXTRA CLAIM FEES	1460	130	1460	130	Petitions to the	Commissioner		
Extra Fee from Fee Claims below Paid	1807	50	1807	50	_	under 37 CFR 1.1	· " ———	
Total Claims 24 -20 ** = 4 X 18 = 72	1806	180	1806	180	Stmt	normation Disclos	sure	
Independent Claims 3 -3 ** = 0 X 86 = 0	8021	40	8021	40	per property (tim	patent assignmer nes number of	nt	
Multiple Dependent X = 0	1809	770	2809	385	properties) Filing a submiss (37 CFR § 1.129	ion after final reje	ction	
Large Entity Small Entity Fee	1810	770	2810	385		nal invention to be	•	
Code (\$) Code (\$) Fee Description	1004	770	2004	205		•	,,,,	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1801 1802	770 900	2801	385	·	ued Examination (F	``E'	
1203 290 2203 145 Multiple dependent claim, if not paid	1002	auu	1802	900	Request for exped of a design applic			
1204 86 2204 43 ** Reissue independent claims over original patent	Other fe	(specify)					
1205 18 2205 9 ** Reissue claims in excess of 20 and								
over onginal patent *Reduced by Basic Filing Fee Paid SUBTOTAL (3)								
SUBTOTAL (2) (\$) 72					-		<u></u>	
**or number previously paid, if greater, For Reissues, see above								
SUBMITTED BY					Com	plete (if applicable	e)	
Name (Print/Type) Eamon J. Wall Registration No. Attorne	y/Agent)	39,4	14'		Telephone	(732)530-9404		
Signature & Mall	Date			Date	ate 3/10/04			
				-				